

2012 AFSCME Federal Employees Health Benefit Plan Premium Rates

The premium rates listed below are for 10 month Para-Professional and Dedicated Aide employees hired on or before 9/30/1987 and entitled to the Federal Health Benefit Plan (FEHB). Employees are paid bi-weekly for 22 pay periods. Premium rates are effective as of January 1, 2012.

TYPE	ENROLLMENT CODE	2012 BIWEEKLY PREMIUM	2012 MONTHLY PREMIUM
AETNA OPEN ACCESS HIGH OPTION			
Self	JN1	\$ 184.34	\$ 405.55
Family	JN2	\$ 414.94	\$ 912.86
AETNA OPEN ACCESS BASIC OPTION			
Self	JN4	\$ 67.88	\$ 149.35
Family	JN5	\$ 158.88	\$ 349.54
AETNA HEALTHFUND CONSUMER DRIVEN HEALTH PLAN (CDHP)			
Self	221	\$ 85.11	\$ 187.25
Family	222	\$ 202.13	\$ 444.67
AETNA HEALTHFUND HIGH DEDUCTIBLE HEALTH PLAN (HDHP)			
Self	224	\$ 51.34	\$ 112.94
Family	225	\$ 112.44	\$ 247.36
APWU HEALTH PLAN HIGH OPTION			
Self	471	\$ 69.61	\$ 153.14
Family	472	\$ 157.39	\$ 346.27
APWU HEALTH PLAN CONSUMER DRIVEN HEALTH PLAN (CDHP)			
Self	474	\$ 48.67	\$ 107.08
Family	475	\$ 109.48	\$ 240.86
BLUE CROSS BLUE SHIELD STANDARD			
Self	104	\$ 101.14	\$ 222.50
Family	105	\$ 234.57	\$ 516.05
BLUE CROSS BLUE SHIELD BASIC			
Self	111	\$ 66.48	\$ 146.26
Family	112	\$ 155.68	\$ 342.50

TYPE	ENROLLMENT CODE	2012 BIWEEKLY PREMIUM	2012 MONTHLY PREMIUM
CAREFIRST BLUECHOICE HIGH OPTION			
Self	2G1	\$ 76.36	\$ 167.99
Family	2G2	\$ 175.94	\$ 387.06
GEHA BENEFIT PLAN HIGH OPTION			
Self	311	\$ 100.93	\$ 222.04
Family	312	\$ 239.12	\$ 526.06
GEHA BENEFIT PLAN STANDARD OPTION			
Self	314	\$ 50.57	\$ 111.26
Family	315	\$ 115.01	\$ 253.03
GEHA HIGH DEDUCTIBLE HEALTH PLAN (HDHP)			
Self	341	\$ 54.53	\$ 119.95
Family	342	\$ 124.54	\$ 273.98
KAISER FOUNDATION HEALTH PLAN HIGH OPTION			
Self	E31	\$ 80.73	\$ 177.60
Family	E32	\$ 200.92	\$ 442.02
KAISER FOUNDATION HEALTH PLAN STANDARD OPTION			
Self	E34	\$ 48.92	\$ 107.63
Family	E35	\$ 112.52	\$ 247.55
MAIL HANDLERS BENEFIT PLAN VALUE OPTION			
Self	414	\$ 46.79	\$ 102.92
Family	415	\$ 111.54	\$ 245.39
MAIL HANDLERS BENEFIT PLAN STANDARD OPTION			
Self	454	\$ 113.86	\$ 250.49
Family	455	\$ 273.27	\$ 601.20
MAIL HANDLERS BENEFIT PLAN CONSUMER OPTION			
Self	481	\$ 63.04	\$ 138.68
Family	482	\$ 142.83	\$ 314.23
MDIPA HIGH OPTION			
Self	JP1	\$ 90.43	\$ 198.95
Family	JP2	\$ 225.05	\$ 495.12
NALC			
Self	321	\$ 88.25	\$ 194.14
Family	322	\$ 178.69	\$ 393.12